

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William S McLaurine, II
 222 Tichenor Ave
 Apt No. 4
 Auburn, AL 36830

2. Article Number

(Transfer from service label)

7006 2760 0002 8193 4577

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERYA. Signature *William S. McLaurine II* 4-6-07

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

William S. McLaurine II

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes*Docv1014 67 R&R*